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of paying reduced fees under Section 41(a	a) and (b) of Title	e 35, United States Cod	nprofit organization as defined in 37 CFR 1.9(e) for p de with regard to the invention entitled
		erythroid cell	ls from the blood of normal donors
and of thalassemic patie		Dita EDANGO	
oy inventor(s) <u>Giovanni MIGLIAC</u> described in	CIO, Anna	RITA FRANCO	
[] the specification	filed herewith		
[X] Application Seri	al No 10/7	786.461	filed February 26, 2004
[] International Ap	nlication No.	000.102	, filed February 26, 2004 , filed
Patent No.			, issued
hereby declare that rights under contract dentified invention.	t or law have bee	en conveyed to and rem	nain with the nonprofit organization with regard to the
listed below* and no rights to the invention under 37 CFR 1.9(c) if that person made 1.9(d) or a nonprofit organization under 3	on are held by an the invention, or 7 CFR 1.9(e). e required from e	y person, other than the by any concern which	, concern or organization having rights to the invention is inventor, who would not qualify as an independent is would not qualify as a small business concern under an accern, or organization having rights to the invention as
Name		·	·
AddressIndividual		Small Business Concern	Nonprofit Organization
Vame	-	· Concern	Nonproju Organization
Address			
Individual		Small Business Concern	Nonprofit Organization
status prior to paying, or at the time of pa small entity is no longer appropriate. (37 hereby declare that all statements made believed to be true; and further that these bunishable by fine or imprisonment, or bo	tying, the earlies CFR 1.28(b)) herein of my ow statements were oth, under Section	n knowledge are true; made with the knowle on 1001 of Title 18 of the	hange in status resulting in loss of entitlement to small y maintenance fee due after the date on which status as and that all statements made on information and belief dge that willful false statements and the like so made a the United States Code, and that such willful false state patent to which this verified statement is directed.
NAME OF PERSON SIGNING	PRO	F. ENRICO	GARACI
TITLE IN ORGANIZATION		DENTE	
ADDRESS OF PERSON SIGNING	Viale Re	egina Elena 299	9, I-00161 ROMA (Italy)
Signature	···		Date March 23, 2004
IL PRESIDE			×

dell'Istitute Superiore di Sanità

Prof. Parico Garaci

Attorney Docket No.



Declaration and Power of Attorney For Patent Application (Sole/Joint)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought, on the invention entitled 'In vitro mass production of human erythroid cells from the blood of normal donors and of thalassemic patients' the specification of which (Check One) is attached hereto. OR February 26, 2004 X was filed on [X] Application Serial No. 10/786,461 [] International Application No. PCT/ and was amended on I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as

amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application..

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent, inventors or plant breeder-s rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent, inventor's or plant breeders rights certificate(s), or any PCT application having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICAT	rion(s)		·		Priority Clai	med
(Number)	(Country)	(Day/Month/Year Filed)			Yes:	No
·	(Commy)	(Bay Month Feat Fried)			Yes:	No
(Number)	(Country)	(Day/Month/Year Filed)			· 	
(Number)	(Country)	(Day/Month/Year Filed)		•	Yes:	No
I hereby claim the benefit under	35 U.S.C. 119(e) of any Uni	ited States provisional applic	cation(s) listed be	low:		
APPLICATION NUMBER:	60/449,841	FILING DATE:	February	27,	2003	
APPLICATION NUMBER:		FILING DATE:				
I or we hereby appoint the regist transact all business in the Paten	-					

Customer Number 6449.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Name of Sole or First Inventor	A petition has been filed for this unsignd inventor.
Given Name (first and middle[if any]} Giovanni	Family Name or Surname MIGLIACCIO
Inventors Signature Mi Com	Date 23/3/04
Residence (City, State, Country) ROMA (Italy)	Citizenship Italian
Mailing Address (Street, City, State, Zip or Postal Code, Co Via Sabina s.n., Villa Adriana,	
Name of Second Inventor	A petition has been filed for this unsignd inventor.
Given Name (first and middle[if any]} Anna Rita	Family Name or Surname FRANCO
Inventores Signature to frame	Date 23 3 04
Residence (City, State, Country) ROMA (Italy)	Citizenship Italian
Mailing Address (Street, City, State, Zip or Postal Code, Code, Via Sabina s.n., Villa Adriana,	
Name of Third Inventor	A petition has been filed for this unsignd inventor.
Given Name (first and middle[if any])	Family Name or Surname
Inventors Signature	Date
Residence (City, State, Country)	Citizenship
Mailing Address (Street, City, State, Zip or Postal Code, Code,	untry)
Name of Fourth Inventor	A petition has been filed for this unsignd inventor.
Given Name (first and middle[if any])	Family Name or Surname
Inventors Signature	Date
Residence (City, State, Country)	Citizenship

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Patent Applic	eation Declaration		·	Page 2 of 2
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